Effective October 1, 2000													
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY													1
TOTAL CLAIMS								RATE	FEE]	RATE	FEE	İ
FOR			NUMBER	FILED		ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			22 minus 20= .			,		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			8 minus 3 =			5		X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135≃	}	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	<u> </u>			
CLAIMS AS AMENDED - PART II										J	OTHER		
_		(Column 1) CLAIMS	THE REPORT OF THE	(Colui	نسط سيسو	(Column 3)	1	SMALL		OR 1	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL /FEE /	
NDM	Total	• 36	Minus	**	22	= 14		X\$ 9=		OR	X\$18=	100 K	DO
AME	Independent	· /)	Minus	PENDEN	CLAIM	= '\		X40=		OR	X80=	257	
L_	FINOT PRESE	NATION OF IM	OLITICE DE	LNUCIN	CLANV		J	+135=		OR	+270=		
								TOTAL ADDIT: FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)	<u> </u>			_			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL _FEE	·
	Total	.35	Minus	ئ	36	= ()		X\$ 9=		OR	X\$18=	/	
	Independent	NTATION OF MI	Minus	*** /	CLAIM	= <i>4</i>	4	X40=		OR	X80= (344	, Vla
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ا لـ	+135=		OR	+270=	•	XX
		•						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	Pau	(34)
		(Column 1)		(Colu		(Column 3)						V	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	+	Minus	**		=	▋┃	X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		E	╽╽	X40=			X80=	,	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM] [OR			: .
	lf the entry to estimate	un 1 in lana than t	ho onto in a-t-	onn a weite	2 "Λ" in c-	iuma 2		+135=		OR	+270=		
••	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rev. 8/00)

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Application or Docket Number